



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4482

SERIAL NUMBER 10/036,408	FILING DATE 01/07/2002 RULE	CLASS 348	GROUP ART UNIT 2613	ATTORNEY DOCKET NO. P/16-300
-----------------------------	---------------------------------------	--------------	------------------------	------------------------------------

APPLICANTS

Katsuyuki Saito, Tokyo, JAPAN;

Akihiko Mochida, Tokyo, JAPAN;

Kotaro Ogasawara, Tokyo, JAPAN; Noboru Kusamura, Tokyo, JAPAN;

Makoto Tsunakawa, Tokyo, JAPAN;

Hideki Tashiro, Tokyo, JAPAN;

Shinji Yamashita, Tokyo, JAPAN;

Kanichi Matsumoto, Tokyo, JAPAN;

Wataru Ohno, Tokyo, JAPAN;

Masahiro Hagihara, Tokyo, JAPAN;

Kazutaka Nakatsuchi, Tokyo, JAPAN;

Kuniaki Kami, Tokyo, JAPAN;

** CONTINUING DATA *Yes* *****

This application is a DIV of 09/120,559 07/22/1998 PAT 6,538,687

** FOREIGN APPLICATIONS *Yes* *****

JAPAN H9-197114 07/23/1997

JAPAN H9-201565 07/28/1997

JAPAN H9-206679 07/31/1997

JAPAN H9-208123 08/01/1997

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/14/2002

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 29	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>JP</i> Initials				

ADDRESS

000002352

OSTROLENK FABER GERB & SOFFEN

1180 AVENUE OF THE AMERICAS

NEW YORK, NY

100368403

TITLE

Endoscopic imaging system making it possible to detachably attach expansion unit having external expansion facility and add expansion facility for improving capability of system

<p>FILING FEE RECEIVED 740</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees (Filing)</p> <p><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</p> <p><input type="checkbox"/> 1.18 Fees (Issue)</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
---	--	--